Docket No.:

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter claimed and for which a patent is sought on the invention entitled_ORGANIC

ELECTROLUMINESCENT DEVICE FOR FABRICATING SHADOW MASK

[X] is attached hereto] was filed onamended	as Application Sc	rial No pplicable)	and was .
I hereby state that I have referred to above.	reviewed and understand the ec	antents of the above identified speci	Neation, including the clai	ms, as amended by any amendmen
I acknowledge the duty to Section 1.56(a).	disclose information which is kn	nown to me to be material to patenta	bility in accordance with T	itle 37, Code of Federal Regulations
inventor's certificate, or pr	rovisional application(s) listed	benefits under Title 35, United State below and have also identified below of the application on which priority is	w any forcign application	y foreign application(s) for patent of for patent or inventor's certificate, or
Prior Enreign Application(s) or U.S. Provisional Application(s):			Priority Claimed	
	Country	Day/Month/Year	Yes	<u>No</u>
Rumper				
P2003-0028628	KOREA	6/May/2003	x	
P2003-0028628 I hereby claim the benefit each of the claims of this States Cade. Section 112.	under Title 35, United States Co application is not disclosed in the	6/May/2003 ado, Section 120 of any United State the prior United States application in tose material information as defined and the national or PCT international (the manner provided by the Title 37, Code of Federa	he first paragraph of Title 35, Unite al Regulations, Section 1.56(a) whic

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I hereby appoint the following atterney(s) and/or agent(s):Daniel Y.J. Kim, Registration No. 36,186 and Mark L. Fleshner, Registration No. 34,596; Carl R. Wesolowski, Registration No. 40,372, John C. Eisenhart, Registration No. 38,128, Carol L. Druzbick, Registration No. 40,287; Anthony H. Nourse, Registration No. 46,121; Laura L. Lee, Registration No. 48,752; Rene A. Vazquez, Registration No. 38,647; Donald R. McPhail, Registration No. 35,811; Timothy M. Speer, Registration No. 47,355; Samuel W. Ntires, Registration No. 39,318; Mark R. Buscher, Registration No. 35,006; and Daniel H. Sherr, Registration No. 46,425, all of

FLESHNER & KIM
P. O. Box 221200
Chantilly, Virginia 20153-1200

With full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and all future correspondence should be addressed to them.

ull name of sole or first inventor: Chang Nam KIM	
nventor's signature:	Date: Agril 1 100
Residence: Seoul, Korea	
Citizenship: Republic of Korea	
Ocst Office Address: #299-24, Junghwn-dong, Jungnang-gu, Scoul, Koren	e de la companya de La companya de la co
· 我也在我的时间中间的最高的有效的,我们就是有效的,我们就是一个人们的,我们就是一个人们的,我们就是一个人们的,我们就是一个人们的,我们就是一个人们的,我们就	+ + + + + + + + + + + + + + + + + + +
full name of sole or Second inventor:	
nventor's signature:	Dete:
Residence:	
Cittzenship:	
Post Office Address:	
***************************************	***
Full name of sole or third inventor:	
Inventor's signature:	Divie:
Residence:	
Citizenship:	
Post Office Address	
***************************************	***************************************
Full name of sole or fourth inventor:	
Inyeniar's signature:	Date:
Residence:	
Citizenship:	
Pust Office Address:	

Full name of sole or tifth inventor:	
Inventor's signature:	Date:
Residence:	
Citizenship:	
Post Office Address:	